



Programme Audit/Major Modification report

Programme provider:	Plymouth, University of
In partnership with: (Associated practice placement providers involved in the delivery of the programme)	Royal Cornwall NHS Foundation Trust Royal Devon and Exeter NHS Foundation Trust Northern Devon Healthcare NHS Trust Taunton and Somerset NHS Foundation Trust Torbay and South Devon NHS Foundation Trust University Hospitals Plymouth NHS Trust Yeovil District Hospitals NHS Foundation Trust
Date of review:	25 Jul 2019
Type of Modification	Desktop
Provision reviewed:	Registered Midwife - 36M
Title of current programme:	BSc (Hons) pre-registration midwifery
Title of modified programme if changed:	
Academic level of current programme:	England, Wales, Northern Ireland Level 5 Level 6 Level 7 SCQF Level 8 Level 9 Level 10 Level 11
Academic level of modified programme if changed:	England, Wales, Northern Ireland Level 5 Level 6 Level 7 SCQF Level 8 Level 9 Level 10 Level 11





Reviewer:	Hilary Lumsden





Outcome of Approval Panel Meeting	
Outcome:	Recommended for approval
Conditions and NMC	Resources
standard(s)/requirement(s) they relate to:	None identified
	Admission and progression
	None identified
	Practice learning
	None identified
	Fitness for practice
	None identified
	Quality assurance
	None identified
Date conditions to be met:	
Recommendations and NMC standard(s)/requirement(s) they relate to:	None identified
Note: recommendations will be assessed through the AEI annual self-assessment report	
Date conditions met:	
Programme start date:	16 Sep 2019





Summary

Summary of modification request

The University of Plymouth (UoP), school of nursing and midwifery provide a three-year BSc (Hons) pre-registration midwifery programme approved against the Standards for pre-registration midwifery education (NMC, 2009). The UoP is an established approved education institution (AEI).

The AEI presented a modification to the approved pre-registration midwifery programme to transfer students from the Standards to support learning and assessment in practice (SLAiP) (NMC, 2008) to the Standards for student supervision and assessment (SSSA) (NMC, 2018) from September 2019. The modification is therefore solely limited to the process for students' learning and assessment in midwifery practice.

Documentary evidence and discussion with the lead midwife for education (LME) confirms there is effective partnership working with heads of midwifery (HoMs) and practice learning partners (PLP) for the implementation of the SSSA. The planning and preparation have been ongoing since 2018. The AEI has been preparing academic and practice learning staff for the new roles of practice supervisor, practice assessor and academic assessor in a timely way for September 2019.

All practice assessment documentation and handbooks have been updated to reflect the SSSA. Students have been informed of the proposed changes and agree to the transfer to the SSSA. All existing students and students commencing the programme from September 2019 will be supervised and assessed under the SSSA (NMC, 2018)

The major modification to the programme is recommended to the NMC for approval.

Feedback from key stakeholders

Presenting Team

Not applicable. Desktop review

The QA visitor had a teleconference on 25 July 2019 with the LME, associate head of practice learning and senior administrator quality assurance. This included clarification about the modification of the practice assessment document (PAD) and ongoing achievement record (OAR) against the SSSA standards. The discussion





included confirmation that the proposed e-portfolio will not be implemented from September 2019. It will be implemented with the new pre-registration midwifery programme which will be approved against the new NMC Standards for pre-registration midwifery programmes to be published late 2019.

Mentors, sign-off mentors, practice teachers and employers

Not applicable - Desktop review

Students

Not applicable - Desktop review

Service users and carers

Not applicable - Desktop review

Examples of notable and innovative practice and standards they relate to

None identified

Potential risks to compliance of education standards and standards they relate to

None identified

Potential risks to the student learning environment and standards they relate to

None identified

Any other risks to public protection

None identified





Areas for future monitoring

• Implementation of the SSSA

Outcome recommendation

The major modification is recommended to the NMC for approval.





NMC Standards

Please refer to the <u>Standards for Pre-Registration Midwifery Education (NMC, 2009)</u>, current programme specific circulars accessed via the <u>NMC Website</u>, EU Directive 2005/36/EC Article 41 (1) and Article 31 (6-7), and Section one of the Mott MacDonald <u>QA Handbook</u>.

Standards for the lead midwife for education		
Standard 1: Appointn	nent of the lead midwife for education	
The NMC requires an a	approved educational institution (AEI) to do the following:	
• •	for education (LME) who is a practising midwife and has a sching qualification on the NMC register.	
Confirm the appointme	ent of an LME with the NMC	
Use the LME for strategic liaison with external agencies such as purchasers of education provision for all matters affecting midwifery education.		
What we found:		
No change since original approval on 19 April 2013.		
Outcome:	Standard met	
Date standards		
met:		
Revised outcome:		





Standard 2: Development, delivery and management of midwifery education programmes

The LME shall lead the development, delivery and management of the midwifery education programmes provided by the AEI, ensuring that they comply with the standards established by the NMC.

What we found:

Documentary evidence and discussion confirms the LME has led the development and planning of the modification to ensure compliance with the SSSA (NMC, 2018).

Discussions about the SSSA were initiated with local practice learning partners (PLPs) and have continued with directors of nursing at a strategic level and local HoMs all of who strongly agreement to implement the SSSA from September 2019.

The LME through annual programme monitoring and programme committee meetings has engaged with midwifery lecturers, midwifery students and practice development midwives. All of whom support the proposed arrangements. In addition, there is evidence of consultation with and informing student midwives of the SSSA in a year three module.

Updates and focussed training of practitioners and academic staff for the new roles of practice supervisor, practice assessor and academic assessor to meet the SSSA have been discussed with the LME, deputy head of school for placements and the school executive committee. Training is now in progress in preparation for September 2019.

Outcome:	Standard met
Date standards	
met:	
Revised outcome:	





Standard 3: Signing the supporting declaration of good health and good character

In accordance with rule 6(1)(a)(ii) of the registration rules, the LME shall be responsible, at her discretion, for signing the supporting declarations of good health and good character for all midwifery applications to the register.

and good character for all midwhery applications to the register.	
What we found:	
No change since orig	inal approval on 19 April 2013.
Outcome:	Standard met
Date standards	
met:	
Revised outcome:	

Standards for admission to, and continued participation in, pre-registration midwifery programmes

Age of entry

St. 4

General requirements

The following requirements for selection should be read and operated alongside programme providers' existing policies and procedures:

4.1 Selection

Wherever practicable, the selection process should include a face-to-face meeting.

Programme providers (AEIs and their service partners) are encourage, wherever possible, to involve lay people and midwifery students in the selection process. Depending on local circumstances they may be involved directly or indirectly in selection.





All individuals in the selection process should receive appropriate training, preparation and updating which includes equality and diversity.

Representatives of partner service provider organisations should be directly involved in the selection process.

The views of the individuals directly involved in selecting applicants should be taken into account when making final decisions on whether to accept or reject an applicant.

4.2 Literacy and numeracy

AEIs are required to ensure that applicants for pre-registration midwifery education programmes have provided evidence of literacy and numeracy that includes prior achievement of basic skills sufficient to undertake a pre-registration midwifery programme of education to a satisfactory level of attainment.

4.3 Good health and good character

Applicants must demonstrate that they have good health and good character sufficient for safe and effective practice as a midwife, on entry to, and for continued participation in, programmes leading to registration with the NMC.

Applicants from overseas must meet the good health and good character as defined for UK applicants and additionally those requirements set out by the UK government for healthcare workers from overseas

4.4 Entry to the register

The NMC requires a self-declaration of good health and good character from all those entering the register for the first time. On completion of the midwifery programme the student will submit this self declaration. The declaration is either supported by the LME, whose name has been notified to the Council and who is responsible for midwifery education in the relevant AEI, or by her designated registered midwife substitute. AEIs must be able to provide evidence of having fulfilled this requirement.

What we found:		
No change since original approval on 19 April 2013.		
Outcome:	Standard met	





Date standards		
met:		
Revised outcome:		
Standard 5: Interrupt	ions to pre-registration midwifery education programmes	
	must ensure that they have in place processes to manage dy of programmes for whatever reason.	
When a student returns to a programme it is recommended they have a period of orientation appropriate to the length of interruption. Programme providers must ensure that the student's acquired knowledge and skills remain valid, enabling them to achieve the necessary standards required on completion of the course.		
What we found:		
No change since original approval on 19 April 2013.		
Outcome:	Standard met	
Date standards met:		
Revised outcome:		

Standard 6: Admission with advanced standing

All applicants, other than those registered as a nurse level one (adult), must complete a minimum three years full-time pre-registration midwifery programme of education.





	eady registered with the NMC as a nurse level one (adult), the tration midwifery education programme shall be no less than	
What we found:		
No change since origin	nal approval on 19 April 2013.	
Outcome:	Standard met	
Date standards met:		
Revised outcome:		
Standard 7: Transfer between approved educational institutions		
It is the responsibility of AEIs to decide whether or not to accept an application for transfer.		
What we found:		
No change since original approval on 19 April 2013.		
Outcome:	Standard met	
Date standards met:		
Revised outcome:		





education programmes		
Students can 'step off' a pre-registration midwifery programme of education.		
What we found:		
No change since origin	nal approval on 19 April 2013.	
Outcome:	Standard met	
Data atau danda		
Date standards met:		
Revised outcome:		
Standards for the structure programmes	ucture and nature of pre-registration midwifery	
Standard 9: Academic standard of programme		
Since September 2008 the minimum academic level for entry to the midwives' part of the register for those entering pre-registration midwifery programmes is degree level (NMC Circular 14/2007).		
Scotland – 360 academic credits, 60 of which must be at level nine.		
England, Wales and Northern Ireland – 300 academic credits, 60 of which must be at level H.		
What we found:		
No change since original approval on 19 April 2013.		
Outcome:	Standard met	





Date standards met:		
Revised outcome:		
Standard 10: Length	of programme	
Article 31(6-7) of EU D programmes in years,	rirective 2005/36/EC now describes the length of midwifery months and hours.	
The length of a pre-registration midwifery programme of education should be no less than three years (equivalent to 156 weeks full time) and each year shall contain 45 programmed weeks.		
Three year direct entry programme – 4,600 hours (minimum requirement)		
Where the student is already registered with the NMC as a nurse level one (adult), the length of the pre-registration midwifery programme of education shall not be less than 18 months (equivalent to 78 weeks full time).		
Eighteen month midwifery programme (following qualification as an adult nurse) – 3,000 hours (minimum requirement).		
What we found:		
No change since origin	nal approval on 19 April 2013.	
Outcome:	Standard met	
Date standards met:		
Revised outcome:		





Standard 11: Student support

Midwife teachers and midwife mentors must meet the NMC's standards to support learning and assessment in practice.

What we found:

Documentary evidence and discussion during the teleconference confirm that supervision and assessment of all cohorts of student midwives from September 2019 will be in accordance with the SSSA (NMC, 2018).

Documentary evidence confirms that there is a collaborative approach to the preparation and ongoing support for the new roles of practice supervisor, practice assessor and academic assessor. There are clear guidelines which include the ongoing preparation, support and monitoring of the new roles which are clearly set out in guidance documents available both online and in hard copy. Detailed guidance about how to complete the practice assessment documentation (PAD) is also provided. The documentation clearly identifies that practice assessors and academic assessors must have due regard.

Documentary evidence and discussion confirms that there will be support and oversight of practice supervisors provided by link midwifery lecturers from the UoP, in collaboration with practice development midwives in each partner NHS Trust. Practice supervisors and assessors will be allocated by the PLP in accordance with the student's individual practice learning allocation.

Practice supervisors will serve as role models to students, ensure safe, effective learning and support learning in line with their scope of practice. They will support and supervise student midwives and provide feedback on student progress towards the achievement of proficiencies and skills in accordance with the PAD.

Practice assessors will be responsible for the support and assessment of student midwives at one summative point in the academic year. The practice assessor will liaise closely with the link teacher and academic assessor regarding student performance and achievement.

Discussion during the teleconference confirmed that midwifery students will also be supported in practice by the link teacher for the relevant PLP. Midwifery link teachers support student midwives in the practice area, and also provide support between the student, practice supervisor and practice assessor.





The current midwifery programme at the AEI has a module in the third year of the pre-registration midwifery programme 'Facilitating learning in midwifery practice'.

This module will prepare the final year student for the role of practice supervisor. On successfully completion of the programme, NMC registration as a midwife and completion of a period of preceptorship the midwife will then be ready to undertake the role of practice supervisor.

Another route to becoming a practice supervisor is attendance at a two-hour preparation workshop. All practice supervisors will have a yearly SSSA update facilitated by the link teacher.

Practice assessors are also prepared through a two-hour preparation session and will have to attend a yearly SSSA update. Additional resources to aid their understanding of the roles include detailed practice supervisor and practice assessor workbooks as well as a practice assessment toolkit.

The pre-registration midwifery programme handbook provides additional guidance on the roles and responsibilities of practice supervisors and practice assessors for student midwives.

The AEI identified that university midwifery academic staff will fulfil the role of academic assessor and confirmed student midwives would not have the same academic assessor for consecutive years. The AEI will provide preparation for the role. The academic assessor will liaise in person, by telephone or email with the practice assessor to collate and confirm student achievement and proficiency for each part, or year, of the programme.

There is a Web based Placement Profile (PEP) that has up to date information about the SSSA and includes the named practice leads responsible for organisational and local practice placement learning. Documentary evidence and discussion confirmed there are up-to-date practice supervisor and assessor registers in each PLP.

Outcome:	Standard met
Date standards met:	
Revised outcome:	





Standard 12: Balance	between clinical practice and theory
Since September 2008	B, the practice to theory ratio of each programme is required to
be no less than 50 per	cent practice and no less than 40 percent theory.
What we found:	
No change since origin	nal approval on 19 April 2013.
Outcome:	Standard met
Date standards	
met:	
Revised outcome:	

Standard 13: Scope of practice experience

Where the opportunity is available, students should be involved in supporting women birthing in a variety of settings.

Student midwives must be involved in the care of a small group of women throughout their childbirth experience, including antenatal, intrapartum and postnatal care.

What we found:

Practice learning experiences are not affected by this modification. Students are placed within a variety of practice learning settings during the three-year programme. They are encouraged to 'caseload' in the third year of the programme. Caseloading is documented in the electronic ongoing achievement record (EOAR).





implementation of SSSA does not affect the approved model of caseloading.					
Outcome:	Standard met				
Date standards met:					
Revised outcome:					
Standard 14: Supern	umerary status during clinical placement				
Students undertaking pre-registration midwifery education programmes cannot be employed to provide midwifery care during their training – all clinical experience should be education-led with students having supernumerary status for the duration.					
What we found:					
No change since origin	nal approval on 19 April 2013.				
Outcome:	Standard met				
Date standards met:					
Revised outcome:					

Standard 15: Assessment strategy





Clinical practice must be graded and be counted as part of the academic award.

All outcomes within a progression point period (for example an academic year) have to be achieved and confirmed within 12 weeks of entering the next academic level. All assessments must be completed and have been passed prior to successful completion of the programme.

A student midwife shall achieve these standards under the supervision of a sign-off mentor.

What we found:

Documentary evidence and discussion during the teleconference confirms the assessment of student's proficiency and competence, EU directives and essential skills clusters (ESCs) are all recorded in the PAD. These aspects of the programme are not changing, as the programme is still mapped against the Standards for preregistration midwifery education (NMC, 2009). However, who is able to contribute to the assessment of practice has changed in line with the new SSSA roles of practice supervisor, practice assessor and academic assessor. The PAD and ongoing achievement record (OAR) is updated to reflect these changes.

The structure of the programme has not been affected by the implementation of the SSSA, therefore the progression points are unchanged. The process of grading of midwifery practice in the modified PAD also remains unchanged.

Documentary evidence confirms communication between the practice supervisor, practice assessor and academic assessor will enable discussion about a student's progress and achievements. The PAD has clearly identified written feedback sheets which will be used as a source of evidence to inform summative assessment and recommendations for student progression. Following summative assessment, the academic assessor reviews the PAD and completes the ongoing OAR.

Within the PAD, there is a clearly identified action plan template to support students failing to achieve. Practice supervisors and practice assessors have access to policies to raise and escalate concerns about students' performance, where necessary.

There will be a different academic assessor for each part of the programme which meets the SSSA requirements. Academic assessors are prepared for their role through the UoP's online platform. The academic assessor will collate and confirm student academic achievement, proficiencies and programme outcomes for each part of the programme. There is a tripartite assessment at the end of each year/part of the programme. This is in collaboration with the practice assessor and may be a





_	r could be conducted by telephone to discuss student if the student can be recommended to progress to the next.
Outcome:	Standard met
Date standards	
met:	
Revised outcome:	

Standard 16: Ongoing record of achievement

An ongoing record of achievement, including comments from mentors, must be passed from one placement to the next to enable judgements to be made on the student's progress.

What we found:

Documentary evidence confirms the OAR has been modified to align with the SSSA. At the end of each summative assessment period, the practice assessor is required to verify progression and provide details regarding areas for the student's development.

Practice assessors will meet with their student and contribute to the student's ORA at the beginning of each stage of the programme; this will facilitate the identification of learning objectives, which can be assessed at regular intervals throughout the year. Practice assessors will also record an objective, evidence-based summative outcome at the final progression point.

Service users will also be able to contribute (anonymously) to the student's OAR





about the student' performance during the delivery of care to the service user.					
Outcome:	Standard met				
Date standards met:					
Revised outcome:					
Achieving the NMC s	tandards				
Standard 17: Compet	tencies required to achieve the NMC standards				
Students need to be proficient in all standards by the end of their training in order to practise safely and effectively as a midwife without the need for direct supervision. A student must demonstrate competence in these standards to enter the register as a midwife.					
What we found:					
No change since origin	nal approval on 19 April 2013.				
Outcome:	Standard met				
Date standards met:					
Revised outcome:					





NMC Circular 03/2011

Resources to support programme intentions

Programme providers must provide evidence at programme approval that resources are currently available to support programme intentions.

What we found:

The AEI provided confirmation that there are resources in the university setting to support the implementation of the SSSA. Documentary evidence provides assurance that there are partnership agreements in place with PLP organisations. These arrangements confirm there are sufficient resources in practice learning environments to support the implementation of the SSSA for the pre-registration midwifery programme.

Monitoring of the effectiveness of the practice learning environment continues to be undertaken in partnership with PLPs. The AEI will continue to complete biennial educational audits of practice learning environments to provide assurance of the effectiveness of the practice learning environment and compliance with the SSSA.

Outcome:	Standard met
Date standards	
met:	
Revised outcome:	

Evidence and references list





UoP Practice assessment toolkit, January 2019

UoP practice supervisor workbook, February 2019

UoP Midwifery practice assessor workbook, February 2019

UoP SSSA roles and responsibilities, undated

UoP handbook for practice supervisors and assessors, undated

Midwifery practice assessor trust preparation, undated

Midwifery practice supervisor preparation delivery plan, February 2019

SSSA preparation dates, undated

Frequently asked questions applying the SSSA, undated

Email discussion with head of midwifery, 8 October 2018

Email discussion with head of midwifery, 10 October 2018

Summary of SSSA preparation sessions, May 2019

Guidance to lecturers, mentor SSSA updates, undated

Mentor register, undated

Midwifery SSSA preparation slides, February 2019

Midwifery lecturers' meeting minutes, 13 February 2019, 14 November 2018

Academic assessor preparation screenshot, undated

BSc (Hons) pre-registration midwifery handbook, 30 May 2019

Capacity flow chart, undated

Electronic ongoing achievement (OAR) record, undated

Email trail between HoM and quality team, 24 May 2019

LME presentation to students, 3 July 2019

MID 342 discussions about new SSSA with students, 26 June 2019

EU log, undated

European union log requirements, undated

Explanation of PAD criteria, grading and final statement, undated

Grading of practice guide E-OAR, undated

Learning contract and learning plan E-OAR, undated

Mandatory requirements for e-portfolio, undated

Midwifery e-portfolio skills practice, undated

Minutes midwifery LME/HoM, 20 March 2019

Midwifery preparation NMC standards and E-OAR, February 2019





Pre-registration midwifery PAD, undated

UoP school of nursing and midwifery academic assessor role agreement, April 2016

Staff role for student midwives caseloading workbook, 2019-2020

Students' caseloading workbook, 2019-2020

Template for service user feedback, undated

Template for staff feedback, undated

Workplace agreement, August 2016

Personnel supporting programme approval				
Members of Approval Panel				
Not applicable. This was a Desktop review				
Programme Presenters				
The QA visitor had a teleconference on 25 July 2019 with: UoP LME UoP Associate head of practice learning				
Were any service providers visited?				
Established AEI - not required				
Meetings with others				
Mentors / sign-off mentors				
Practice teachers				
Service users / Carers				
Practice Education Facilitator				
Director / manager nursing				
Director / manager midwifery				





Education commissioners or equivalent	
Designated Medical Practitioners	
Other (please specify)	

If there were no representatives present during the approval event please state why:

Not applicable. This was a desk-top review.

Meetings with students

Nursing										
Adult	Year 1 Year 2		ır 2		Yea	r 3		Y	ear 4	
Mental Health	Year 1		Year 2		Year 3		Y	ear 4		
Children's	Year 1 Year 2		Year 3		Y	ear 4				
Learning Disabilities	Year 1 Year 2		Year 3		Year 4					
Midwifery (3 year)	Year 1	Year 1 Year 2			Yea	r 3		-		
Midwifery (18 month)	Year 1	Year 1 Year 2								
SCPHN	HV	S	SN OH		FHN		IN		RPHN	
Learning and Assessment in	Mentor			Practice Teacher				Tea	che	er





Practice			
Nurse Prescribing	V100	V150	V300
Specialist Practice	Adult	Mental Health	Children's
	Learning Disability	General Practice Nursing	Community Mental Health Nursing
	Community Learning Disabilities Nursing	Community Children's Nursing	District Nursing

Additional evidence viewed

CQC Report Royal Cornwall NHS Foundation Trust, 14 December 2018

CQC Report Royal Devon and Exeter NHS Foundation Trust, 30 April 2019

CQC Report Northern Devon Healthcare NHS Trust, 5 February 2018

Mott MacDonald Group Disclaimer

This document is issued for the party which commissioned it and for specific purposes connected with the captioned project only. It should not be relied upon by any other party or used for any other purpose.

We accept no responsibility for the consequences of this document being relied upon by any other party, or being used for any other purpose, or containing any error or omission which is due to an error or omission in data supplied to us by other parties.

Issue record





Author:	Hilary Lumsden	Date:	14 Aug 2019
Checked by:	Judith Porch	Date:	17 Aug 2019
Approved by:	Helen Shapcott	Date:	19 Aug 2019